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CONFIRMATION NO. 8748

<b>SERIAL NUMBER</b> 10/620,212	<b>FILING OR 371(c) DATE</b> 07/15/2003 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b>
<b>APPLICANTS</b> Thomas L. Merrill, E. Windsor, NJ; Derk Krieger, Shaker Heights, OH; Brack Hattler, Pittsburgh, PA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/395,842 07/15/2002				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 10/10/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 13
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> Thomas L. Merrill 25 Lynnfield Dr. E. Windsor, NJ08520				
<b>TITLE</b> Active mixing exchange catheter and method				
<b>FILING FEE RECEIVED</b> 725	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	